

# Laboratory Animal Care Inspection Checklist

Facility Name

Location

Date

Inspector

## General Husbandry

Item	Yes	No	Comments/Actions Required
Routine daily observation of animals completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Appropriate food and water provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Clean cages and bedding present?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Proper waste disposal procedures followed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

## Facility & Equipment

Item	Yes	No	Comments/Actions Required
Temperature and humidity within acceptable range?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Ventilation adequate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Lighting appropriate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Equipment clean and functional?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

## Animal Health & Records

Item	Yes	No	Comments/Actions Required
Animals appear healthy and free of disease/injury?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Clinical or daily records maintained and up-to-date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Veterinary care readily available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

## Personnel

Item	Yes	No	Comments/Actions Required
Staff appropriately trained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Protective clothing and equipment used as required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

## Other Observations

Inspector Signature

Date